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APPLICANTS						
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** CONTINUING DATA *****						
None SJL						
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IF REQUIRED, FOREIGN FILING LICENSE GRANTED						
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Allowance <i>[Signature]</i> Initials						
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TITLE						
Imaging composition and method						
FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:			<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue)		
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